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FOR IMMEDIATE RELEASE

March 24, 2005

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CMS TO REQUIRE CERTAIN NURSING HOMES TO INSTALL SMOKE DETECTORS

Nursing homes that do not have sprinkler systems or hard-wired smoke detectors will have to install battery-operated ones in patient rooms and public areas according to an announcement made today by the Centers for Medicare & Medicaid Services (CMS).

“This is an important rule that could save many lives by making real improvements in nursing home safety,” said CMS Administrator Mark B. McClellan, M.D., Ph.D. “Nursing home residents are an especially vulnerable population and we need to take every step possible to protect them.”

CMS took this unprecedented action after two tragic nursing home fires in Connecticut and Tennessee in 2003. Neither home had smoke detectors in the patient rooms where the fires originated. The agency worked closely with the National Fire Protection Association to develop ways to get effective fire protection into all facilities.

A review of the two incidents by the Government Accountability Office (GAO) asserted that smoke detectors could have resulted in quicker staff response that may have led to a better outcome.

Today’s action will considerably improve the safety of residents living in over 4,000 nursing homes that do not have sprinkler systems. Newly constructed nursing facilities are required to be fully covered by a sprinkler system, while older homes built of noncombustible materials like concrete block are not. Homes will be given a year in which to comply with the new requirement.

The NFPA is the group that developed the 2000 edition of the Life Safety Code that CMS uses to set the standard in health care facilities.

Also in today’s interim final rule is a provision that will allow nursing homes, hospitals, ambulatory surgical centers and other health care facilities to install dispensers of alcohol-based hand sanitizers in exit corridors that meet certain conditions. This had not been allowed previously because of concerns that the alcohol rubs may serve as an accelerant in the event of a fire and block access to exits. Studies on this concern, however, have shown that if certain

conditions are met, that fire hazard is greatly reduced while there can be a significant benefit in reducing hospital-acquired infections.

Alcohol-based hand rubs are more effective at destroying bacteria than ordinary soaps and water. This is critically important in a health care setting. The Centers for Disease Control estimates that two million patients a year get hospital-based infections and that 90,000 of those patients die. Hospital-based infections can often be traced to a lack of hand washing by health care personnel with direct patient contact.

“As a physician, I am very familiar with the important role hand hygiene plays in stopping the spread of infections,” said Dr. McClellan. “Increasing the number of these dispensers in and near patient rooms has proven to significantly increase hand cleansing activities by health care professionals and even the patients themselves.”

Some precautions facilities must take include making sure the dispensers are not near a heat or ignition source, that they are at least four feet apart and that they are placed in corridors at least six feet wide.

The full interim final rule will be published in the March 25 *Federal Register*.

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Life Safety Code 3145-IFC Qs & As

Alcohol Based Hand Rubs (ABHR)

Question 1: What is CMS doing?

Answer 1: CMS is allowing certain health care facilities to install alcohol-based hand rub (ABHR) dispensers in egress corridors under certain conditions. Health care facilities that choose to install ABHR dispensers in egress corridors are required to do so in accordance with state and local codes, in a manner that minimizes leaks and spills that could lead to falls, in a manner that limits access to them by vulnerable populations, and in accordance with the specifications detailed in chapters 18.3.2.7 or 19.3.2.7 of the 2000 edition of the Life Safety Code.

Question 2: Are ABHRs safe to install in egress corridors?

Answer 2: Yes. In 2003 the American Society of Healthcare Engineering presented a computerized fire modeling study that demonstrated the safety of ABHR dispensers in egress corridors. The study, conducted by Gage-Babcock & Associates, demonstrated that it is safe to install ABHR dispensers in egress corridors if certain size and location conditions are met. This regulation adopts the size and location conditions that were identified in the Gage-Babcock study and are now included in the 2000 edition of the Life Safety Code.

Question 3: Why are ABHRs important?

Answer 3: Alcohol-based hand rubs are an increasingly common tool used by health care facilities to increase hand hygiene levels. Because they are faster and more effective than soap and water hand washing, the presence of ABHRs is likely to lead to an increase in hand hygiene. Increased hand hygiene has been associated with reduced rates of health care-associated infections.

Question 4: Do health care facilities have to install ABHR dispensers in egress corridors?

Answer 4: No. Health care facilities do not have to install ABHR dispensers anywhere. If they choose to install ABHR dispensers, the dispensers could be installed in egress corridors in accordance with the regulation (this is new). Dispensers could also be installed in-patient rooms, suites, and other appropriate locations (this is in the existing rule, which we are expanding to include corridors).

Question 5: Why is CMS finalizing this rule before the public has an opportunity to comment on it?

Answer 5: CMS is finalizing this rule without an initial public comment period because we believe that it is not in the public interest to continue to prohibit health care facilities from installing ABHR dispensers in all

appropriate locations, including egress corridors. The ABHRs are an effective and safe infection control method, and we believe that it is in the public interest to allow facilities to quickly take full advantage of them. The introduction of ABHR dispensers in all appropriate locations will, we believe, help facilities prevent health care acquired infections.

Nursing Facility Smoke Detectors

Question 6: What is CMS requiring?

Answer 6: CMS is requiring long-term care facilities to install battery-operated smoke detectors in resident rooms and public areas if they do not have a hard-wired smoke detector system installed in those areas or a sprinkler system installed throughout the building. CMS is allowing facilities one year after the effective date of this interim final rule with comment period to come into compliance with this provision.

Question 7: How would the rule improve resident safety?

Answer 7: Smoke detectors are a basic fire safety device and they are already required by the 2000 edition of the Life Safety Code to be in resident rooms when a resident brings in his or her own furniture. This rule would expand on the existing requirement by applying it to all resident rooms and public areas, regardless of the presence of resident owned furniture. Having smoke detectors in these areas provides residents and staff with earlier warnings of fires in resident rooms and public areas. This earlier warning gives residents and staff more time to implement a facility's emergency plan, including notifying the local fire department.

Question 8: Why is CMS requiring that nursing facilities install battery-operated smoke detectors?

Answer 8: Battery-operated smoke detectors are a fast and inexpensive way to enhance fire safety beyond what is called for in the 2000 edition of the Life Safety Code (the edition that CMS adopted in January 2003), published by the NFPA. We believe that requiring battery-operated smoke detectors balances the need to ensure that long-term care facility residents are safe with the need to ensure that facilities are able to comply with regulations in a timely fashion.

Question 9: Why is CMS not requiring that nursing facilities install a sprinkler system?

Answer 9: Sprinkler systems are considered to be the best fire safety method. They are also the most time-consuming and expensive method with regard to purchasing and installing. The time and cost burdens associated with sprinkler systems preclude them from being an immediate solution to fire safety concerns in long-term care facilities. They may, however, be a viable long-term solution to fire safety. CMS is continuing the

dialogue with the NFPA, the nursing facility industry, and consumer advocates to explore this long-term option.

Question 10: How does the regulation relate to the Government Accountability Office (GAO) report, “Nursing Home Fire Safety: Recent Fires Highlight Weaknesses in Federal Standards and Oversight”?

Answer 10: Recommendation six of the GAO report stated that CMS should work with the NFPA to strengthen fire safety standards for unsprinklered long-term care facilities. The recommendation specifically suggests requiring smoke detectors in resident rooms as one way to strengthen fire safety standards. This regulation implements this recommendation by requiring smoke detectors in resident rooms and public areas.

Question 11: If a nursing facility has a sprinkler system installed throughout the building or a hard-wired smoke detection system in resident rooms and public areas, does it have to install battery-operated smoke detectors?

Answer 11: No. Facilities that have a sprinkler system installed throughout the building or a hard-wired smoke detector system installed in resident rooms and public areas do not have to install battery-operated smoke detectors in resident rooms and public areas.

Question 12: Why is CMS only requiring long-term care facilities to install smoke detectors?

Answer 12: Based on the recent fire record of nursing homes and their level of staffing, CMS is requiring only long-term care facilities to install smoke detectors. Hospitals and other types of health care facilities are not included because the staffing levels and fire records do not indicate the need for this type of protection to be installed.

Question 13: Why is CMS finalizing this rule before the public has an opportunity to comment on it?

Answer 13: CMS is dedicated to providing a high level of fire safety for all long-term care residents. As such, we believe that it is not in the public interest to delay the effective date of this new requirement. We believe that long-term care facilities that do not have sprinklers installed throughout the building need to quickly begin making plans and arrangements to install smoke detectors in resident rooms and public areas in order to provide a higher level of fire safety than is currently required by the Life Safety Code.